

## **Town of Springerville Police Department**

### **HOW TO MAKE A COMPLAINT**

- 1) If you wish to make a complaint about the actions of a police officer or about any aspect of police operations, please:
  - a) Come to the department and tell any employee that you want to make a complaint; or
  - b) Call the department and tell the person answering the phone that you want to make a complaint; or
  - c) Write your complaint and mail it to the Chief of Police.
- 2) A supervisory officer will assist you in filling out a report of complaint against police personnel form.  
This form asks you to identify yourself and then to give specific details about your complaint.
- 3) Your complaint will then be investigated. You may be contacted and asked additional questions about your complaint.
- 4) If you would like to be contacted about the outcome of your complaint, then when your complaint has been investigated, the Chief of Police will review the investigation and will write you a letter explaining what has been found out about the matter.

**Town of Springerville Police Department**  
**REPORT OF COMPLAINT AGAINST POLICE PERSONNEL**

Name of Complainant: \_\_\_\_\_

At what address can you be  
contacted?: \_\_\_\_\_

What phone number? Residence: \_\_\_\_\_ Employment: \_\_\_\_\_

Date and time of incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Name of officer(s) against whom complaint is being filed, or other identifying marks (car number, badge number, etc.)

Rank: \_\_\_\_\_ Name: \_\_\_\_\_

I.D.# \_\_\_\_\_ Badge: \_\_\_\_\_

Vehicle: \_\_\_\_\_

Name(s)/address/phone number or other identifying information concerning witness:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Statement of allegation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If further space is needed use reverse side of sheet)

I understand that this statement of complaint will be submitted to the Springerville Police Department and may be the basis for an investigation. Further, I sincerely and truly declare and affirm that the facts contained herein are complete, accurate, and true to the best of my knowledge and belief. Further, I declare and affirm that my statement has been made by me voluntarily without persuasion, coercion, or promise of any kind.

I understand that, under the regulation of the police department, the officer against whom this complaint is filed may be entitled to request a hearing before a personnel appeals board. By signing and filing this complaint, I hereby agree to appear before a personnel appeals board, if one is requested by an officer, and to testify under oath concerning all matters relevant to this complaint.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_ Check if complainant refused to sign

\_\_\_\_\_  
Signature of Person Receiving Complaint

\_\_\_\_\_  
Date and Time Received